

Attorney Docket No.

BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 Facsimile: (703) 205-8050

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

my name; that I verily bei original, first and joint in which a patent is sought o	wentor (if plural inventors are name on the invention entitled:"Transgen th is attached hereto. If not attache	ed below) of the subject matter which is Mollusk and Method for Pro-	ich is claimed and for ducing the Same
the specification of which	h is attached hereto. If not attache	ed hereto,	
the specification was	otion Number		as
and amended on	adon Namoci	(ii	applicable) and/or
the specification was	s filed on February 24, 2000		as PCT
International Applica amended under PCT	s filed on February 24, 2000 PCT/JP00/01060 Article 19 on		; and was (if applicable)
claims, as amended by an I acknowledge the du Federal Regulations, §1.56 I do not know and dour invention thereof, or thereof or more than one States of America more the subject of an inventor's ce America on an application designs) prior to this applified in any country foreign assigns, except as follows. I hereby claim fore application(s) for patent or patent or inventor's certific Prior Foreign Application 48444/99	o not believe the same was ever kno patented or described in any printe year prior to this application, that nan one year prior to this application ertificate issued before the date of the filed by me or my legal represental ication, and that no application for n to the United States of America printeger priority benefits under Title or inventor's certificate listed below a cate having a filing date before that con(s) Japan	material to patentability as defined with or used in the United States of dipublication in any country before the same was not in public use on, that the invention has not been is application any country foreign tive or assigns more than twelve in patent or inventor's certificate on the country application by me or my large than the country foreign than the country of the application on which priority of the application on which priority to the country	America before my or the my or our invention or on sale in the United patented or made the to the United States of anorths (six months for his invention has been legal representatives or (a)-(d) of any foreign application for
(Number)	(Country)	(Month/Day/Year Filed)	
Number) I hereby claim the benefit isted below.	(Country) : under Title 35, United States Code	(Month/Day/Year Filed) c, §119(e) of any United States pro	visional applications(s)
Application Number)		(Filing Date)	
Application Number)		(Filing Date)	
All Foreign Applications, Designs) Prior to the Filing	if any, for any Patent or Inventor' g Date of This Application:	s Certificate Filed More than 12	Months (6 Months for
Country	Application Number	Date of Filing (Month)	'Day/Year)
hereby claim the benefit	under Title 35, United States Code,	§120 of any United States and/or P	CT application(s) listed
States and/or PCT applications and states and states are districted as the duty to	subject matter of each of the claim ation in the manner provided by the disclose information which is mate 5 which became available between the te of this application.	e first paragraph of fitte 35, Unite erial to the patentability as define	d in Title 37, Code of
Application Number)	(Filing Date)	(Status - patented,	pending, abandoned)
Application Number)	(Filing Date)	(Status - patented,	pending, abandoned)

Attorney Docket No.

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys withat written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or P.O. Box 747 · Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 · Facsimile: (703) 205-8050

Customer No. 2292

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	•	DATE*		
Keizaburo MIKI	Daluro W	uki	March 6,	200	
Residence (City, State & Country)			CITIZENSHIP		
Naka-gun, Kanagawa, JAPAN			Japanese .		
POST OFFICE ADDRESS (Complete Street					
548-7, Higashikoiso, Oiso-machi,	Naka-gun, Kanagawa 25	55-0004 Jap	pan	Į	
	A MUMAN				
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	ļ	
Johji MIWA	4 muri		March 6,	200	
Residence (City, State & Country)	CITIZENSHI		1		
Yokohama-shi, Kanagawa, JAPA	Japanese	•			
POST OFFICE ADDRESS (Complete Street	Address including City, State &	& Country)		·	
6-30, Sugitatsubonomi, Isogo-ku,	Yokohama-shi, Kanagav	va 235-003	4 Japan		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	-	
Nozomu ISOWA	M, Isawa		March 1,	200	
Residence (City, State & Country)			CITIZENSHIP		
Shima-gun, Mie, Japan		Japanese	:	1	
POST OFFICE ADDRESS (Complete Street	Address including City, State &	& Country)			
822-4, Koshika, Shima-cho, Shim	a-gun, Mie 517-0704 Jap	an			
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Residence (City, State & Country)			CITIZENSHIP		
POST OFFICE ADDRESS (Complete Street	Address including City, State 8	& Country)			
· ·					
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	SIGNATURE		DATE*	
·					
Residence (City, State & Country)			CITIZENSHIP		
i		L			
POST OFFICE ADDRESS (Complete Street	Address including City, State &	& Country)			